



George A. Soddors
Auditor of Clark County

OHIO-The Heart of it All!



DIRECTORS

Sandra Schinkle
Fiscal Services

Robert Vanderhorst
Real Estate

Nikki Crawford
Appraisal

Dear Taxpayer:

You may be eligible for a 2½% Homestead Tax Reduction on your residential Property. **In order to qualify for this 2½% tax reduction on your home**, you Must meet the following qualifications:

- 1. You must own your home as of January 1 of the tax year in which you apply.**
- 2. You must occupy your home as your principal place of residence for a substantial portion of the year**
- 3. An owner means a person(s) whose name(s) is on the deed to the home, or a buyer under a land contract, or a life estate tenant, or a mortgagor.**

Only one home in the State of Ohio owned by the same person and his/her spouse is entitled to the 2½% reduction.

If you meet the qualifications by living in your home a substantial portion of the year and your name is on the deed, please fill out the application on the reverse side and return it to my office.

If you should have any questions about this entitlement, please contact our office at (937) 328-2415, (937) 328-2659 or visit us on the web at www.co.clark.oh.us and follow the links.

Sincerely,

George A. Soddors
Clark County Auditor

**PLEASE RETURN THIS NOTICE WITH
COMPLETED APPLICATION TO:**

**GEORGE A. SODDERS
CLARK COUNTY AUDITOR
A. B. GRAHAM BUILDING
P.O. BOX 1325
SPRINGFIELD, OHIO 45501**



Return Service Requested

**George A. Sadders
Clark County Auditor
P.O. Box 1325
Springfield, OH 45501**

HOMESTEAD TAX REDUCTION APPLICATION

NAME OF OWNER(S) OF HOME _____

ADDRESS OF HOME _____

DATE HOME ACQUIRED _____ FROM WHOM _____

TYPE OF HOME: SINGLE FAMILY, UNIT WITHIN A MULTI-UNIT DWELLING, CONDOMINIUM

IS THE LAND SURROUNDING THE HOME MORE THAN ONE ACRE? YES NO

DO YOU OCCUPY ALL OF THE BUILDING IN QUESTION AS YOUR PRINCIPAL PLACE OF RESIDENCE?

YES NO IF NO, GIVE DETAILS _____

I declare under penalty of perjury that this application has been examined by me and to the best of my knowledge and belief it is a true, correct and complete return and report.

SIGNATURE OF APPLICANT _____

DATE _____

Parcel # _____ **IMPORTANT!!!!!! PLEASE WRITE THE PARCEL NUMBER, FROM THE FRONT MAILING LABEL, IN THE SPACE PROVIDED.**